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**TRANSMITTAL
FORM***(to be used for all correspondence after initial filing)*

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/678607	
	Filing Date	10/3/2003	
	First Named Inventor	Frederick Hayes-Roth	
	Art Unit	3623	
	Examiner Name	Anderson, Folashade	
Total Number of Pages in This Submission		Attorney Docket Number	FHR-102/US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawings	<input type="checkbox"/> After Allowance Comm. to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related papers	<input type="checkbox"/> Appeal Comm. to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Comm. to TC <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Power(s) of Attorney, Revocation Change of Corresp. Address	<input type="checkbox"/> Statement(s) under 3.73(b)
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Declaration
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Assignment
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, <i>Number of CD(s)</i> _____	<input type="checkbox"/> Recordation Cover Sheet
<input type="checkbox"/> Certified Copy of Priority Doc(s)	<input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Other (<i>Specified below</i>)
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Other:	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

FIRM NAME	LUMEN PATENT FIRM		
SIGNATURE	/ Trieu T. Mai / Reg.No. 61,354		
PRINTED NAME	Trieu T. Mai		
DATE	1/16/09	REGISTRATION NUMBER	61,354

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:	
SIGNATURE	/ Patricia Shepherd /
PRINTED NAME	Patricia Shepherd
DATE	1/16/09

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SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.: 10/678,607

Conf. No.: 6153

5 First named inventor: Hayes-Roth, Frederick

Filing date: 10/03/2003

Title: Open Community Model for Exchanging Information in
Dynamic Environments

TC/A.U.: 3623

10 Examiner: Anderson, Folashade

Docket No.: FHR-102/US

Customer No.: 30869

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Reply

Commissioner for Patents
Alexandria, VA 22313-1450

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Sir:

This reply is in response to an office action dated November 14, 2008. With this reply,
the Applicant kindly submits the following.

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